patient would find it impossible to walk, and he would drop that which he had in his hands. It ceased during sleep. The other patient, also a pronounced epileptic, was seized one day with rigidity of the right lower extremity, accompanied with tremor of the thigh. The leg was lifted by the very energetic and spasmodic contractions of the quadriceps femoris. Six to seven rhythmic contractions per second were counted. This local spasm lasted a week, with momentary jerks of the extremity. During sleep it ceased. If the legs were forced to move, which was not entirely possible, the spasm would show a tendency, as in partial epilepsy, to extend to the upper extremity.—*La Semaine médicale-Norsk Magazin f. Laegevidenskaben*, No. 3, 1892. F. H. P.

CLINICAL.

CONTRIBUTIONS TO THE CLINICAL HISTORY OF FOCAL LESIONS OF THE PONS.

Dr. Martin Brasch (Neurolog. Centralbl., p. 225, 1892). The patient, who is the subject of Brasch's communication, was a physician, forty-seven years old, who had never had syphilis, neither had he inherited any neuropathic tendencies. In 1888 he had an attack of paresis of the internal rectus muscle of the left eye, and on the first of November, 1890, he had a relapse, and fourteen days later ptosis and paresis of the external rectus, and a few days later vertigo and paresis of the members of the right side. At the beginning of December the following conditions presented: Paresis of the abducens on both sides; on the right side paralysis of all the external fibres of the oculo-motorius, on the left only the internus. On the right there was also anæsthesia of the area supplied by the two superior branches of the trigeminus, and paresis of the muscles innervated by the facial. Left arm and leg paretic.

As the disease progressed the paralysis involved the four extremities; the ptosis of the left eye was somewhat intermittent, the patellar reflex diminished on both sides, and there was trouble with mastication, deglutition, and respiration, and consequent difficulty in speech, followed two and a half months later by the death of the patient.

The autopsy showed in the spinal cord an alteration in the ganglionic cells of the anterior horns, most

marked in the cervical and dorsal segments of the cord, and an affection of the posterior columns and lateral columns and roots, which varied in intensity in different locations, associated with moderate involvement of the blood-vessels. In the medulla there was found to be degeneration of all the nuclei with the exception of the acusticus, and likewise degeneration of the pyramids. In the right side of the pons was found an area which included the roots of the outgoing facial and trigeminus nerves, and the nucleus of the first was entirely unaffected, while that of the last was destroyed, and this involvement extended sidewise to the pyramidal column of the right side.

The isolated diseased parts were the nucleus of the abducens, the posterior portion of the oculo-motorius nucleus, the posterior longitudinal fasciculus and the left half of the fillet, and a very small portion of the right cerebral peduncle.

In dwelling on the exposition of this case, the author states that it was not possible to consider the symptoms as being dependent upon a focal lesion, as this was eliminated by the manifest change in the condition of the patellar reflex which pointed to a spinal lesion. And the late involvement of lumbar segment of the cord is the explanation of the comparatively late appearance of the loss of knee-reflex.

The article is illustrated by a few woodcuts, which serve admirably to give a proper conception of the lesions and their proper interpretation, especially the one representing a longitudinal section through the pons and medulla. J. C.

ACROMEGALY.

At a meeting of the Medical Society of Lyons, February, 1892, Dr. Bard communicated an observation which he had made relative to acromegaly. The patient's trouble apparently arose from tumefaction and enlargement of the pituitary body which pressed upon the optic chiasma. M. Bard, following out the idea and suggestions of Brown-Sequard, prepared the pituitary glands of a sheep, by maceration in glycerine and then rendering it aseptic, and with this made an injection. He has never had any bad results either from the formation of abscess or from symptoms of poisoning follow; and he prefers an emulsion made from the pituitary either of